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PTO/SB/21 (09-06)

Approved for use through 03/31/2007. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/797,231
Filing Date	March 10, 2004
First Named Inventor	Hammond
Art Unit	2812
Examiner Name	A. G. Ghyka
Attorney Docket Number	ASC-057C1

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	-Certificate of Mailing
<input checked="" type="checkbox"/> Information Disclosure Statement w/ -Form PTO/SB/08 -Copy of cited reference C80	<input type="checkbox"/> CD, Number of CD(s) _____	-Return Receipt Postcard
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Remarks	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	GOODWIN PROCTER LLP		
Signature			
Printed name	Natasha Us		
Date	November 14, 2006	Reg. No.	44,381



FEE TRANSMITTAL For FY 2005		Complete if Known		
		Application Number	10/797,231	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	March 10, 2004	
		First Named Inventor	Hammond	
		Examiner Name	A. G. Ghyka	
TOTAL AMOUNT OF PAYMENT		Art Unit	2812	
(\$)		180.00	Attorney Docket No.	ASC-057C1

METHOD OF PAYMENT (check all that apply)	
<input checked="" type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input type="checkbox"/> Deposit Account	Deposit Account Number: <u>07-1700</u> Deposit Account Name: <u>Goodwin Procter LLP</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	Filing Fees	Small Entity	Search Fees	Small Entity	Examination Fees	Small Entity	Fees Paid (\$)
	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
						Small Entity	
Fee Description						Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
- =		x	=		Fee (\$)		Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
- =		x	=				
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets		Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)		
- 100 =		/50	(round up to a whole number) x	=			
4. OTHER FEE(S)							Fees Paid (\$)
Other (e.g., late filing surcharge): <u>Submission of an Information Disclosure Statement</u>							180.00

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	44,381
Name (Print/Type)	Natasha Us	Telephone	617-570-1000
		Date	November 14, 2006



Docket No.: ASC-057C1
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Hammond et al.

Application No.: 10/797,231

Confirmation No.: 2980

Filed: March 10, 2004

Art Unit: 2812

For: METHOD OF SELECTIVE REMOVAL OF
SiGe ALLOYS

Examiner: A. G. Ghyka

INFORMATION DISCLOSURE STATEMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Pursuant to 37 CFR 1.56, 1.97 and 1.98, the attention of the Patent and Trademark Office is hereby directed to the references listed on the attached PTO/SB/08. It is respectfully requested that the information be expressly considered during the prosecution of the above-referenced application, and that the references be made of record therein and appear among the "References Cited" on any patent to issue therefrom.

In accordance with 37 CFR 1.98(a)(2)(ii), Applicants have not submitted copies of U.S. patents and U.S. patent applications. Applicants submit herewith a copy of the non-patent literature in accordance with 37 CFR 1.98(a)(2).

Applicants hereby apprise the Examiner of the reexamination, and Office actions issued therein, of the parent patent to which this application claims priority, U.S. Patent No. 6,900,094.

11/16/2006 RFEKADU1 00000060 10797231

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This Information Disclosure Statement is filed more than three months after the U.S. filing date, AND after the mailing date of the first Office Action on the merits, but before the mailing date of a Final Office Action or Notice of Allowance (37 CFR 1.97(c)).

Our check in the amount of \$180.00 covering the fee set forth in 37 CFR 1.17(p) is enclosed. The Director is hereby authorized to charge any deficiency in the filed fees to our Deposit Account No. 07-1700, under Order No. ASC-057C1.

Dated: November 14, 2006

Respectfully submitted,

By 

Natasha Us

Registration No.: 44,381

GOODWIN PROCTER LLP

Exchange Place

Boston, Massachusetts 02109

(617) 570-1000

Attorney for the Applicants



PTO/SB/08A/B (09-06)
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Substitute for form 1449/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)				Complete if Known	
				Application Number	10/797,231
				Filing Date	March 10, 2004
				First Named Inventor	Hammond
				Art Unit	2812
				Examiner Name	A. G. Ghyka
Sheet	1	of	1	Attorney Docket Number	ASC-057C1

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number-Kind Code ² (if known)			
	A68*	US-6,646,322	11-11-2003	Fitzgerald	
	A69*	US-6,689,211	02-10-2004	Wu et al.	

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Country Code ³ -Number ⁴ -Kind Code ⁵ (if known)				

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. * CITE NO.: Those application(s) which are marked with an asterisk (*) next to the Cite No. are not supplied (under 37 CFR 1.98(a)(2)(iii)) because that application was filed after June 30, 2003 or is available in the IFW. ¹ Applicant's unique citation designation number (optional). ² See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
	C80	Wolf, et al., "Silicon Processing for the VLSI Era: Vol. 1- Process Technology, 2nd ed., pp. 198 (Lattice Press 1986).	

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.

Examiner Signature		Date Considered	
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Application No. (if known): 10/797,231


Attorney Docket No.: ASC-057C1

Certificate of Mailing under 37 CFR 1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

on November 14, 2006.
Date


Signature

Gregory William

Typed or printed name of person signing Certificate

Registration Number, if applicable

617-570-1000
Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Transmittal Form (1 page)
Fee Transmittal Form (1 page)
Check in the amount of \$180.00
Information Disclosure Statement (2 pages)
Information Disclosure Statement by Applicant - Form PTO/SB/08 (1 page)
Copy of cited reference C80
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